PTO/S8/06 (08-03)
Approved for use through 7/31/2006, OMB 0651-0032
U.S. Patent and Testemark Office; U.S. DEPARTMENT OF COMMERCE.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application by hospital Class Control number		
CLAIMS AS FILED - PART I OTHER THAN												
(Cohumn 1				otumn 1)	(Column 2)			SMALL ENTITY		OR.	OR SMALLE	
K	FOR L		NUA	NUMBER FILED		MUMBER EXTRA		RATE	FEE]	RATE	FEE
Le	OTAL CLAIMS								.385.°	OR		:770.0
E	77 CFR 1.16(c))			minus :	20 =	•		x \$ 9.0 =		OR	x : 18.0.	
6	(DEPENDENT CL) 17 CFR 1.16(b))	ADAS		minus	3	•		x \$130=		OR	x : 86.2	
4	ULTIPLE DEPEN	NT	(37 CFR 1.16(d))		+5/452		OR	+=290.2				
١٠,	If the difference is	an zero, e	enter V in octum		TOTAL		OR	TOTAL				
CLAIMS AS AMENDED - PART II												
1	13/05	(Cohumn 1) (Cohumn 2) (Cohumn 3)						SMALL	ENTITY	OR		R THAN ENTITY
٧		RE	LAIMS MAINING		HIGHEST NUMBER	PRESENT	1	RATE	ADDI-		RATE	ADDL
AMENDMENT		AME	VFTER MOMENT		PREVIOUSLY PAID FOR	EXTRA			TIONAL FEE			TIONAL
Š	Total (37 CFR 1.16(ct)	.0	22	Minus	20	1 /	1	x : 9 -		OR	x s/8 -	
ű	(I/O CFR L16(b))	<u> </u>	1	Minus	" 4	' /		x 543 =		OR .	× 586 -	
4	FIRST PRESEN	TATION	OF MULTIPL	E DEPENO	BIT CLANS (37	DFR (.16(t0))	$\ \ $	+5/4/2=		OR	+:290.	
1	16506							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	(0)		umo 1)		(Column 2)	(Column 3)						
ω		REN	AIMS MINING		HIGHEST NUMBER	PRESENT] [RATE	ADDI		RATE	ADD1-
Z			FTER VOMENT		PREVIOUSLY PAID FOR	EXTRA			TIONAL FEE		, A.C.	TIONAL
AMENDMENT	Total (37 CFR 1.15(c))	12	O	Minus	3257	6		x39 =		OR	x s/8 =	722
Ä	Independent (DI OFR 1.15(b))	· L	F	Minus	"4	1	11	× 43 =	=	_OR-	× 5 86	
₹	FIRST PRESENT	TATION C	FMATPLE	DEPEND	ENT CLAIM (37 C	FR 1.16(d)) →	H	+145.		OR OR	290	
				, ,	TOTAL ADD'L FEE		OR I	TOTAL ADDL FEE	_			
		(Cota	mn 1}		(Column 2)	(Column 3)		•				
ပ			AIMS AINING		HIGHEST NUMBER	PRESENT	۱ſ	RATE	ADDI-	ſ		
Z		AF	TER DMENT		PREVIOUSLY PAID FOR	EXTRA		IONIE	TIONAL FEE	l	RATE	ADDI- TIONAL
NE SE	Total (12 OFR 1.16(c))	•		Minus	**	=	ľ	× 9 .	166	OR	× 5/8 -	FEE
AMENDMENT	Independent (37 CFR 1.16(b))	•		Minus	•••	-	<u> </u>	x 5 4 3 =		OR OR	x = 86 -	
A	FIRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (37 CFR 1,16(d))							+145.		OR OR	+ 290=	
							TOTAL ADD'L FEE		OR .L	TOTAL ADD'L FEE		
•	If the entry in co	lumber i	Previously 1	Paid For	IN THIS SPACE	is loce than 20 .	3.	L		J.,		
	If the "Highest N	umber F	reviously F	Paid For 1	N THIS SPACE	is less than 3, er	der -)°.				1

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fite (and by the USP10 to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete; including gathering, preparing, and submitting the completed application form to the USP10. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief furnation Officer, U.S. Patent and Tradernark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.